

ness costs less also in a "firetrap" hospital, but no one would condemn fireproof buildings for hospitals on that basis.

No, nurses are not unreasonable in asking for a twelve-hour day. They were, and are, foolishly advised in using the methods they sometimes employ in bringing the shorter day about.

The costs of sickness ought to be, can be, and will be decreased somewhat by better organization, elimination of waste, substitution of necessities for luxuries in buildings, equipment and otherwise, but we should not try to fasten "sweatshop" methods upon any group of employees in order to make a showing.

It is not the twelve-hour day but other dangers, and some of them serious, that threaten the standing of this splendid and important technical group of the medical and health agencies. Of the many dangers that threaten, the most important and far-reaching is the overspecialization in nursing organizations and among individual nurses. The second greatest danger is, that too many nurses are so conducting themselves as to merit the designation of super-nurse, etc., that is being bestowed upon them in ever-widening circles.

With wise leadership among themselves, these and other pitfalls may be avoided. We hope they may and that the world may continue to hold nursing as the sacred service-loving calling that Florence Nightingale made it.

WHO IS RESPONSIBLE FOR THE CHILD?

Numerous educational and political documents now being issued from time to time make it perfectly apparent that many of our organizations consider control of the child a public duty rather than the responsibility of parents, which was the vogue when we were all youngsters. These organizations are making headway and it looks very much as if in the course of time they might win the point they are striving for.

We wonder how many people think what will happen after this point is gained.

One thing that already is happening is indicated by Mr. J. C. Astredo, probation officer of San Francisco, when he says, "THERE SEEMS TO BE A WILLINGNESS UPON THE PART OF PARENTS TO LET THE COMMONWEALTH ASSUME EVER-INCREASING RESPONSIBILITIES FOR THE CARE AND DIRECTION OF CHILDREN." Mr. Astredo is in a position to secure accurate data upon subjects of this character, and his fair-mindedness in presenting this data cannot be questioned. Statements of this kind cause those who are trying to push the nation headlong into a difficult situation to pause and consider what they are doing.

Many mothers need help and many children need help, but could we not plan so as to render assistance of whatever character to or through the mother and thus prop up and support the independence and integrity of the home? Surely our people, when they know the facts, are not ready to make of motherhood a "brooding plant" and the weaned child an exclusive responsibility of the commonwealth.

THE FORDS OF MEDICINE

Every so often some new genius discovers again the old, old formula that everybody can have expensive hospital and medical care except the "poor middle class." They say the rich can buy it and the poor can have it for nothing, but those "middle class" people can't pay present costs of doctors' service or hospitals.

Nearly every one of these financiers expects either that wealthy people will provide subsidies, that the costs of hospitals and doctors' fees be reduced, or that the state take over all hospital, and, consequently of course, all medical work. The answer, of course, is to first catch your bird.

Henry Ford decided that there were millions of poor "middle class" people—God bless them—who wanted, and therefore should be allowed, to ride in automobiles. By a combination of business genius, energy, and common sense he has been able to provide them a car. It travels and delivers its passengers at their destination, but it does not satisfy, and every owner wishes for a *better* car more intensely than he originally wished for *any* car.

The only possible way, except by gifts from persons or the state, by which hospital service and medical fees can be brought much below their present scale is, by doing what Ford did to automobiles—put cheap material together in a "standardized" plant and use unskilled drivers. Such tactics will neither satisfy the demands of the sick nor give the service they should have.

Handing the problem to the state does not decrease the cost. Good government hospitals cost every bit as much, and even more than others, to operate. There is plenty of voluntary sickness and health insurance offered by many reliable companies at premium rates that even the "poor middle class," which, by the way, include most physicians, can pay. Instead of wasting our time on economic absurdities, why not spend more effort in pointing out to people the available practical remedies that exist?

Henry Ford, be it remembered, tried the hospital game. He has a fine plant, which charges only quite moderate rates for service, *but* it takes a Ford to absorb the deficit.

A very large percentage of the people who can well afford to pay costs of sickness, and for luxuries if they want them, carry every form of sickness, accident, and health insurance. They do it as a good business policy. Why in the name of justice should not others who need such protection pay the small premiums it takes to carry it?

NEVADA MEDICAL ASSOCIATION

The annual meeting of the Nevada Medical Association will be held this year September 12 and 13, at Bowers Mansion near Reno. The committee having the arrangements in charge is already active, and is preparing a very attractive program, including some unusually promising social features.

Physicians interested in the development of the program should communicate promptly with the secretary, Claude E. Piersall, Masonic Temple, Reno.

The complete program of the session will be published in CALIFORNIA AND WESTERN MEDICINE in due course of time.